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## BIB DATA SHEET

CONFIRMATION NO. 9358

<b>SERIAL NUMBER</b> 10/632,008	<b>FILING or 371(c) DATE</b> 07/31/2003 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 1619	<b>ATTORNEY DOCKET NO.</b> 02-263		
<b>APPLICANTS</b> Robert E. Richard, Wrentham, MA; Marlene C. Schwarz, Auburndale, MA; Frederick H. Strickler, Natick, MA; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 10/28/2003						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/SARAH ALAWADI/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> MAYER & WILLIAMS PC 251 NORTH AVENUE WEST 2ND FLOOR WESTFIELD, NJ 07090 UNITED STATES						
<b>TITLE</b> Implantable or insertable medical devices containing silicone copolymer for controlled delivery of therapeutic agent						
<b>FILING FEE RECEIVED</b> 876	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		